PTO/SB/21 (07-06)
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		Application Number	09/911,855-Conf. #3890			
TRANSMITTAL		Filing Date	July 23, 2001 Shoji Nakamura			
FORM		First Named Inventor				
(to be used for all correspondence after initial filing)		Art Unit	1745			
		Examiner Name	J. J. Rhee			
Total Number of Pages in This Submission	11	Attorney Docket Number	04558/053001			
ENCLOSURES (Check all that applie)						

ENCLOSURES (Check all that apply)							
X Fee Transr	mittal Form	Drawing(s)		After Allowance Communication to TC			
X Fee	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendmer	nt/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After	Final	Petition to Convert to a Provisional Application		Proprietary Information			
Affida	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address		Status Letter			
x Extension	of Time Request	Terminal Disclaimer		X Other Enclosure(s) (please Identify below):			
Express Abandonment Request		Request for Refund		Return Receipt Postcard Certificate of Express Mailing (1 page)			
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Reply to Missing Parts/ Incomplete Application		Remarks					
Reply 37 C	y to Missing Parts under FR 1.52 or 1.53	Certificate of Express Mailing (1 page)					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name	OSHA · LIANG LLP						
Signature	78						
Printed name	Thomas K. Scherer						
Date	September 5, 2006	R	Reg. No.	45,079			

Application No. (if known): 09/911,855

Attorney Docket No.: 04558/053001

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Fee Transmittal (1 page)

One Month Request for Extension of Time Under 37 CFR 1.136(a)

(1 page)

Notice of Appeal (1 page)

Pre-Appeal Brief Request for Review (5 pages)

Transmittal (1 page)

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					09/911,855-Conf. #3890			
FEE TRANSMITTAL			Filing Date		July 23, 2001			
1	'			<del></del>		Shoji Nakamura		
<u> </u>	or FY 200	)	Examiner Name	J.	J. J. Rhee			
Applicant claims	small entity status. S	See 37 CFR 1.27	Art Unit	1	1745			
TOTAL AMOUNT OF	PAYMENT	(\$) 620.00	Attorney Docket	No. 0	04558/053001			
METHOD OF PAY	MENT (check all the	hat apply)						
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		s) or underpayment of	x Credit	any overpay	ments			
FEE CALCULATIO	nder 37 CFR 1.16 a	and 1.17						
1. BASIC FILING, SEA		INATION FEES				<del></del>		
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Application Type Utility	<u>Fee (\$)</u> 300	Fee (\$) Fee (\$		Fee (\$) 200	<u>Fee (\$)</u> 100	rees i	Paid (\$)	
Design	200	100 100		130	65			
Plant	200	100 100		160	80			
Reissue	300	150 500		600	300			
Provisional	200	100 0		0	0			
2. EXCESS CLAIM FE		100 0	v	v	v		Small Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (in	icluding Reissues)	!				50	25	
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent cla	aims					360	180	
Total Claims E	xtra Claims F	ee (\$) Fee	Paid (\$) Multiple Depen			dent Claims		
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3. APPLICATION SIZE							_	
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		application size fee di			ity) for each a	dditional 5	0	
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4. OTHER FEE(S)	=	/50	(round up to a wh	ole number) x		=	Paid (\$)	
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g. late filing surcharge). 1251 Extension for response within first month 120.00								
	14	01 Notice of appea	<u> </u>			50	00.00	
SUBMITTED BY	<u></u>		Desistation No					
Signature	<u> </u>		Registration No. (Attorney/Agent) 45,079 Telephone (713) 228-8600			8-8600		
Name (Print/Tyne) Thor	as K Scherer	<del></del>			Date	Sentembe	r 5 2006	